DEPARTMENT OF HUMAN SERVICES DIVISION OF MENTAL HEALTH & ADDICTION SERVICES

CSS Eligibility Criteria Checklist

Consumers must meet the medical necessity standard to be eligible to receive CSS. The medical necessity standard requires the presence of a "severe mental health need." N.J.A.C. 10:37B-1.2 (definition of eligible consumer).

In order to ensure that a consumer seeking CSS meets the medical necessity standard, the following checklist outlining the criteria for establishing a severe mental health need, as that term is defined at N.J.A.C. 10:37B-1.2, must be completed.

I. Background Information

A. Consumer Information:	
Last Name:	
First Name:	Middle Initial:
DOB:	
B. Person completing the checklist:	
Last Name:	
First Name:	
Title:	
Employer:	
C. Date checklist completed:	

II. Severe Mental Health Needs: The consumer must meet the criteria set forth in Sections A, B and C below.

A. The consumer has a serious mental illness as evidenced by a diagnosis of and a documented history of treatment of or evaluation for the following (please check all applicable diagnoses, if any):

_____ Schizophrenia

_____ Schizophreniform Disorder

_____ Schizoaffective Disorder

____Delusional Disorder

_____ Psychotic Disorder NOS

_____ Major Depressive Disorder Recurrent

Bipolar I disorder
Bipolar II Disorder
Bipolar Disorder NOS
Schizotypal Personality Disorder; or
Borderline Personality Disorder
Other SMI diagnosis:

B. The consumer requires active rehabilitation and support services to achieve the restoration of functioning to promote the achievement of community integration and valued life roles in the social, employment, educational and/or housing domains.

_____ Yes _____ No

C. The consumer meets at least one of the following three criteria (please check all that apply):

______ i. Currently functions at a level, as assessed by an instrument approved by the Division, that puts the consumer at risk of hospitalization or other intensive treatment setting, such as 24 hour supervised congregate group or nursing home as assessed using an instrument approved by DMHAS instrument;

_____ ii. Exhibits deterioration in functioning that will require hospitalization or treatment in another intensive treatment setting in the absence of community based services and supports;

_____ iii. Does not have adequate resources and supports to live safely in the community.

Consumer's GLOF: _____